

MODIFICATION OF GRANT OR AGREEMENT					PAGE	OF PAGES
					1	2
			OOPERATOR GRANT or IUMBER, IF ANY:	3. MODIFICA	TION NUME	BER:
11-FI-11050359-013 AGREEMENT NUMBER, IF ANY: 001						
4. NAME/ADDRESS OF U.S. FOREST SERVICE UNIT ADMINISTERING GRANT/AGREEMENT (unit name, street, city, state, and zip + 4): 5. NAME/ADDRESS OF U.S. FOREST SERVICE UNIT ADMINISTERING PROJECT/ACTIVITY (unit name, street, city, state, and zip + 4):						
El Dorado National Forest			El Dorado National Forest			
100 Forni Rd			100 Forni Rd			
Placerville, CA 95667-531			Placerville, CA 95667-5310			
6. NAME/ADDRESS OF RECIPIENT/COOPERATOR (street, city, state, and zip + 4, county):			7. RECIPIENT/COOPERATOR'S HHS SUB ACCOUNT NUMBER (For HHS payment use only):			
Garden Valley FPD			, , , , , , , , , , , , , , , , , , ,			
P.O. Box 408						
Garden Valley, CA 95633-0408						
8. PURPOSE OF MODIFICATION						
CHECK ALL This modification is issued pursuant to the modification provision in the grant/agreement						
THAT APPLY:	referenced in item no. 1, above.					
\boxtimes	CHANGE IN PERFORMANCE PERIOD: May 1, 2012 through April 30, 2013					
	CHANGE IN FUNDING:					
×	ADMINISTRATIVE CHANGES: Change FS Administrative Contact to: John V. Hefner, Grants Management Specialist,					
F	631 Coyote St., Nevada City, CA 95959. Telephone: 530-478-6828 Fax: 530-478-6126 Email:jvhefner@fs.fed.us OTHER (Specify type of modification):					
Except as provided herein, all terms and conditions of the Grant/Agreement referenced in 1, above, remain unchanged and in full force and effect.						
9. ADDITIONAL SPACE FOR DESCRIPTION OF MODIFICATION (add additional pages as needed):						
Annual Operating Plan for 2012 is the same and will remain in effect through April 30, 2013						
10. ATTACHED DOCUMENTATION (Check all that apply):						
	Revised Scope of Work		411			
	Revised Financial Plan					
	Other:					
11. SIGNATURES						
AUTHORIZED REPRESENTATIVE: BY SIGNATURE BELOW, THE SIGNING PARTIES CERTIFY THAT THEY ARE THE OFFICIAL REPRESENTATIVES OF						
THEIR RESPECTIVE PARTIES AND AUTHORIZED TO ACT IN THEIR RESPECTIVE AREAS FOR MATTERS RELATED TO THE ABOVE-REFERENCED GRANT/AGREEMENT.						
11.A. Nevada County Consolidated Fire Department 11.B. DATE 11			11.C. U.S. FOREST SERVICE SIGNAT	URE		I.D. DATE
SIGNATURE SIGNED			VII OIN I			SIGNED
			Cay my U Harry			121/12
(Signature of Signatory Official)			(Signature of Signatory Official)			10110
11.E. NAME (type or print): BILL DEKKER			11.F. NAME (type or print): KATHYRN D. HARDY			
11.G. TITLE (type or print): Fire Chief			11.H. TITLE (type or print): Forest Supervisor			
12. G&A REVIEW						
12.A. The authority and format of this modification have been reviewed and approved for signature by: 12.B. DATE SIGNED						
Kellie Hamille						
KELLIE HAMILTON, R5						
U.S. Forest Service Grants & Agreements Specialist						



Burden Statement

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